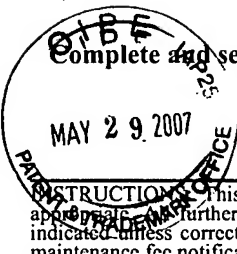


5-30-7  
PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
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279 7590 04/16/2007

TREXLER, BUSHNELL, GIANGIORGI,  
BLACKSTONE & MARR, LTD.  
105 WEST ADAMS STREET  
SUITE 3600  
CHICAGO, IL 60603

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Maria E. Kitz	(Depositor's name)
<i>Maria E. Kitz</i>	(Signature)
MAY 29, 2007	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/511,126	01/28/2005	Egbert Frenken	(913/42188) CASE 346-PCT-	8860

TITLE OF INVENTION: ELECTROHYDRAULIC PRESSING DEVICE AND METHOD FOR OPERATING THE SAME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	07/16/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
JONES, DAVID B	3725	072-453150

05/31/2007 HVUONG2 00000012 10511126

01 FC:1504 300.00 OP  
02 FC:1501 1400.00 OP

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Trexler, Bushnell,  
2. Giangiorgi,  
3. Blackstone & Marr, Ltd

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE  
GUSTAV KLAUKE GmbH

(B) RESIDENCE: (CITY and STATE OR COUNTRY)  
Germany

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

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- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 20-1495 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Richard A. Giangiorgi  
Typed or printed name Richard A. Giangiorgi

Date May 29, 2007  
Registration No. 24,284

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